

Quarterly Totals

Demographic Reporting Form

Positive Alternatives

Date: June 20 - September 30, 2016 Grantee Name/City: LifeCare Center TR Falls

1. Client Age Range:

Under 15	15-17	18-19	20-24	25-29	30-34	35+	Unknown age
		2	9	3	1	2	2

2. Client Pregnancy Status:

1st Trimester	2nd Trimester	3rd Trimester	Post-partum	Pregnancy Status Unknown
6	1	1	2	

3. Client Marital Status:

Married	Not Married	Marital Status Unknown
1	5	5

4. Client Race:

Race: White	Race: African-American	Race: African-African	Race: American Indian	Race: Asian Pacific	Race: Other/ Multi Race	Race: Unknown
9			1			1

5. Client Ethnicity:

Hispanic Ethnicity: Yes	Hispanic Ethnicity: No	Ethnicity: Unknown
	12	

INSTRUCTIONS FOR COMPLETING DEMOGRAPHIC REPORTING FORM

1. Enter the date covered by the reporting period. The date will correspond to the quarterly report (e.g., January – March, 2015).
2. Enter your organization name.
3. Using the Individual Demographic forms collected during the reporting period, enter the totals for each of the demographic categories in numbers 1 – 5. Each category should total the same number, since there should be an entry in each category for each Individual Demographic form. For example, if you had 5 new clients this quarter, you would have 5 Individual Demographic forms. For each of these forms, there would be an entry on this Quarterly Demographic Report on the Client Age Range, the Client Pregnancy Status, the Client Marital Status, the Client Race and the Client Ethnicity. 5 new clients = 5 entries in each category on the Quarterly Demographic Report. If you don't have information in a category on a client, enter a number for her in the last box "unknown".
4. Save the form as a new document. Send it in by email with your Update Report of the same quarter. Reports are due the **20th of the month after the end of a quarter**.
5. Reuse the form each quarter.